Charles M. Palmer Director

INFORMATIONAL LETTER NO.1307

TO: Iowa Medicaid Physician, Dentist, Advanced Registered Nurse

> Practitioner, Therapeutically Certified Optometrist, Podiatrist, Pharmacy, Home Health Agency, Rural Health Clinic, Clinic, Skilled Nursing Facility, Intermediate Care Facility, Community Mental Health, Family Planning, Residential Care Facility, ICF MR State and Community Based ICF/MR

Providers

FROM: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

October 22, 2013 DATE:

RE: Update to Respiratory Syncytial Virus (RSV) 2013-2014 Season

EFFECTIVE: Immediately

On September 23, 2013, the IME announced the requirements of prior authorization (PA) of palivizumab, including the start date for administration, via Informational Letter No. 1292. While this PA requirement remains in effect, the start date has been revised to an earlier date due to the early season onset last season. The start date will be re-evaluated annually based on historic virology data for lowa.

- Start Date: Palivizumab approval period begins November 1, 2013 and will be considered through March 31, 2014.
- Doses: A maximum of five doses will be allowed per member during a single season. Some members may receive up to a maximum of three doses, dependent on gestational and chronological age at the start of the RSV season. No allowances will be made for a sixth dose.
- RSV Season: Providers should follow RSV virology for their area in Iowa on the Department of Public Health's website at http://www.idph.state.ia.us/Cade/Influenza.aspx to determine the appropriate start date for each patient to ensure the set number of doses provide coverage during the peak of the season, when prophylaxis is most effective.
- Dosage: Palivizumab is to be dosed 15mg/kg monthly. Dispense the minimum units necessary for the dosage. Pharmacies will be subject to audit to ensure the NDC(s) dispensed will total the dosage closest to the dosage required. Overbilled units are subject to recoupment.
- Billing: Palivizumab 50mg Injection should be billed as 0.5 ml. Palivizumab should be billed no more frequent than every 30 days.

Questions

Providers may go to the website at www.iowamedicaidpdl.com to view all PDL and PA information. If you have questions, please contact the Pharmacy Prior Authorization Helpdesk at 877-776-1567 or 515-256-4607 (local in Des Moines) or email info@iowamedicaidpdl.com.

For questions relating to obtaining a medical PA, please contact the IME Medical Prior Authorization Unit at 888-424-2070 or 515-256-4624 (local in Des Moines).

For any other questions, such as how to bill, please contact the IME Provider Services Unit at 1-800-338-7909, or locally in Des Moines at 515-256-4609 or email at imeproviderservices@dhs.state.ia.us.